



Your Plan for Better Health

Open Enrollment 2017
October 1 – 17, 2016

Important Dates

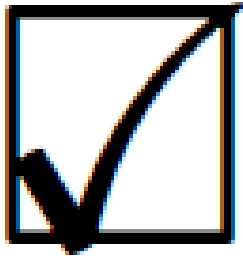
- Open Enrollment Deadline is October 17
- Enrollment forms mailed in must be postmarked by October 17
- Changes effective January 1, 2017

Important Information for 2017

- Premium Increase of 5%
- New specialty pharmacy tier
 - 20% after deductible
 - Max \$200/script
- Extended Benefits Office Hours
 - Tuesday, October 11, 8:00 am – 7:00 pm

Health Plan's Five Guiding Principles

1. Finding the best care for our employees, retirees and their families
2. Better monitoring our employees' health in order to reduce emergency room visits and inpatient days
3. Finding physicians that take personal responsibility for the care of their patients
4. Improving the health of our employees, retirees and families
5. Maintaining a sustainable health plan by reducing the growing cost of health care



Medical & Dental Plans

Delta Dental Benefits

	DeltaCare Prepaid (DHMO)		Dental PPO (DPPO)	
	DHMO - Low Option*	DHMO - High Option	DDPO - Low Option**	DPPO - High Option
Deductible	None		\$50 per person/ \$150 per family	\$50 per person/\$150 per family
Annual Maximum	None		\$1,000 per person	\$1,500 per person
Provider	Member must use participating provider		Unlimited - PPO Network available	Unlimited - PPO Network available
Preventive & Diagnostic Care	You pay fixed copayments according to the plan's schedule of benefits		Plan pays 100% with no deductible	Plan pays 100% with no deductible
Basic Restorative Care	You pay fixed copayments according to the plan's schedule of benefits- Specialist referral is required under this plan.		Plan pays 50%	Plan pays 80%
Major Restorative Care	You pay fixed copayments according to the plan's schedule of benefits- Specialist referral is required under this plan.		Plan pays 50%	Plan pays 50%
Orthodontia	You pay fixed copayments according to the plan's schedule of benefits		NA	Plan pays 50%

*When referable services are provided by a contract specialist including an oral surgeon, endodontist, periodontist or pediatric dentist, the enrollee pays 75% of that dentist's "filed fees."

**You may be balance billed for going to a non-Delta Dental PPO network dentist. You will be billed the difference between the PPO fee and the Delta Dental Premier dentist fee or the Out-of-Network dentist fee.



The City of Fort Worth
Aetna Medicare Advantage
Informational Meeting





We believe every retiree deserves
health, happiness and peace of mind

That's why we're here to talk about the Aetna Medicare Advantage plan for retirees

- Affordable premiums
- Get more benefits
- Easy to use
- Working with your doctors

Some common Medicare Advantage myths

Healthcare reform is eliminating Medicare Advantage plans.

FALSE

Medicare Advantage is just another supplemental plan like the one you already have.

FALSE

If you enroll in Medicare Advantage, you lose your Original Medicare coverage.

FALSE

You can't get more coverage for less money. It's too good to be true.

FALSE

Is Medicare Advantage a smart choice?

More than
17.3
million retirees
have chosen
Medicare Advantage
Plans¹

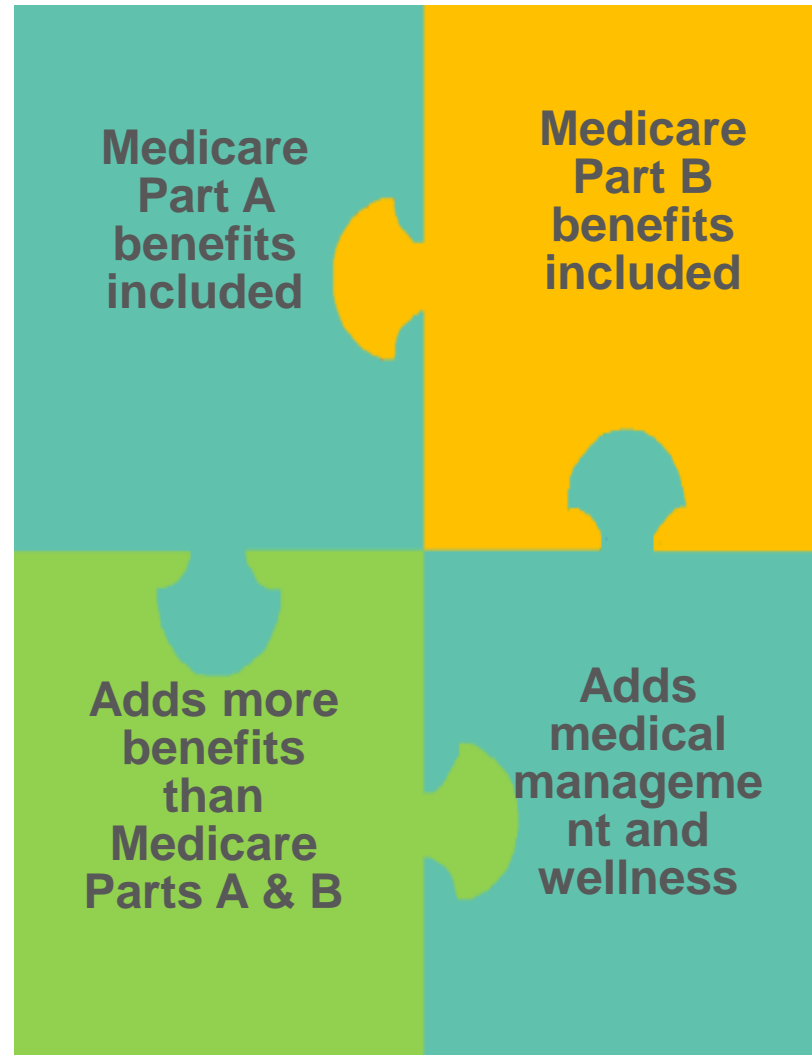
Patients enrolled in a
Medicare Advantage plan had
better health
outcomes
than retirees enrolled in
traditional Medicare²

Millions of retirees think so.

¹CMS February 2015 Medicare Advantage enrollment data.

²Boston Consulting Group, "Alternative Payer Models Show Improved Health-Care Value." *BCG.Perspectives by the Boston Consulting Group*. May 14, 2013. Available at https://www.bcgperspectives.com/content/articles/health_care_payers_providers_alternative_payer_models_show_improved_health_care_value/

Meet the Medicare Advantage Plan designed for The City of Fort Worth



Discover the Medicare Advantage plan



Discover your
prescription drug
benefits



:The Aetna PDP offers you

- 68,000+ and growing pharmacies nationwide
- Aetna's Rx Home DeliverySM
- Easy-to-use online tools

*The number of pharmacies listed is approximate and is subject to change, due to CMS' "any willing provider" requirement as well as ongoing contracting efforts. Data is current as of 4/7/15 and is subject to change.

Some Medicare prescription drug-related definitions

Formulary

Precertification

**Mail Order
Drugs (MOD)**

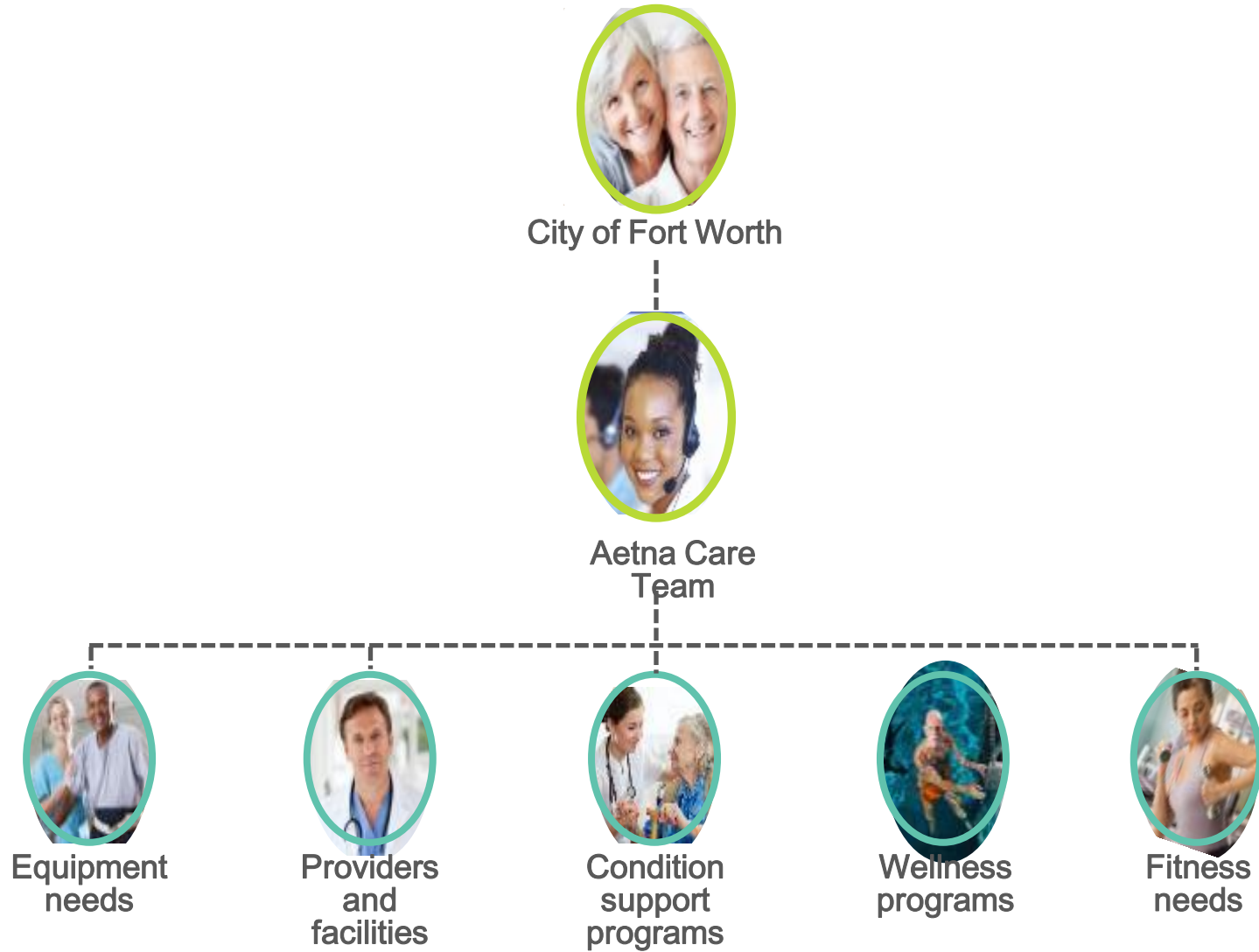
Quantity limits

Step therapy

Get more



Get your own health support team





**Annual hearing test
at no extra cost**

**Annual eye
exam at no extra
cost**





**Get gym
memberships,
personal fitness tools
and one-on-one
support**



**Healthy lifestyle
coaches, by
phone or online**

A photograph of an elderly couple embracing on a beach. The woman, on the left, has short dark hair and is wearing a white shirt. The man, on the right, has white hair and a mustache, and is wearing a dark long-sleeved shirt. They are both smiling and looking towards the right. The background shows a sandy beach and a hilly coastline under a bright sky. The text "Easy to use" is overlaid on the left side of the image.

Easy to use

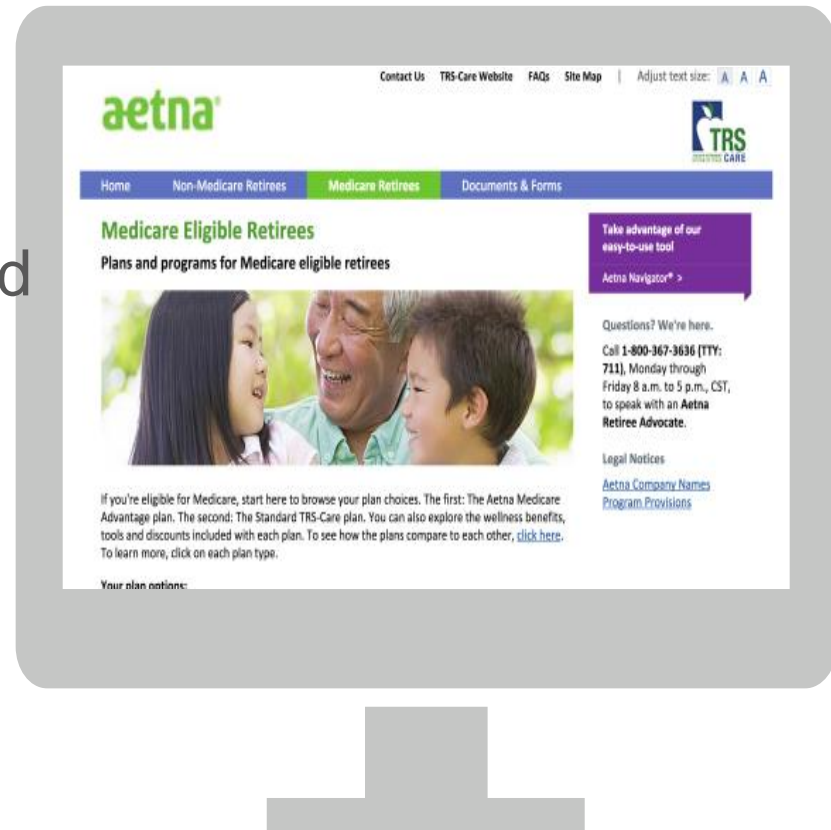
Original Medicare can seem complicated

- Multi-step payment process
- Multiple cards
- Multiple Explanations of Benefit



Find great resources yourself, anytime, online.

- Aetna Navigator
- Aetna Mobile
- DocFind
- Personal Health Record



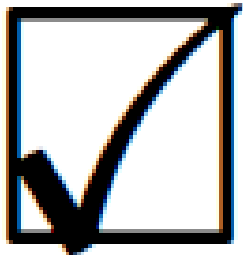


This is an advertisement. Aetna Medicare is an HMO/PPO/PDP plan with a Medicare contract. Our SNPs also have contracts with State Medicaid programs. Enrollment in Aetna Medicare depends on contract renewal. This information is not a complete description of benefits. For more information, contact the plan. Limitations, copayments, and restrictions may apply. Benefits, formulary, pharmacy network, provider network, premium and/or copayments/coinsurance may change on January 1 of each year. Plans are offered by Aetna Health Inc., Aetna Health of California Inc., and/or Aetna Life Insurance Company (Aetna). Not all health services are covered. See Evidence of Coverage for a complete description of benefits, exclusions, limitations and conditions of coverage. Plan features and availability may vary by location. Participating physicians, hospitals and other health care providers are independent contractors and are neither agents nor employees of Aetna. The availability of any particular provider cannot be guaranteed, and provider network composition is subject to change. The [Formulary, pharmacy network, and/or provider network] may change at any time. You will receive notice when necessary. You must continue to pay your Medicare Part B premium. For mail-order, you can get prescription drugs shipped to your home through the network mail-order delivery program. Typically, mail-order drugs arrive within <x> days. You can call <phone number/TTY/hours of op> if you do not receive your mail-order drugs within this timeframe. [Members may have the option to sign-up for automated mail-order delivery.] This material is for informational purposes only and is not medical advice. Health information programs provide general health information and are not a substitute for diagnosis or treatment by a physician or other health care professional. Contact a health care professional with any questions or concerns about specific health care needs. Providers are independent contractors and are not agents of Aetna. Provider participation may change without notice. Aetna is not a provider of health care services and, therefore, cannot guarantee any results or outcomes. The availability of any particular provider cannot be guaranteed and is subject to change. Information is believed to be accurate as of the production date; however, it is subject to change. For more information about Aetna plans, refer to our website. Health® is a U.S.-registered trademark of Aetna Inc. AetnaSM is a trademark of Aetna Inc. and is protected throughout the world by trademark registrations and treaties. Informed Health nurses do not diagnose, prescribe or give members medical advice.

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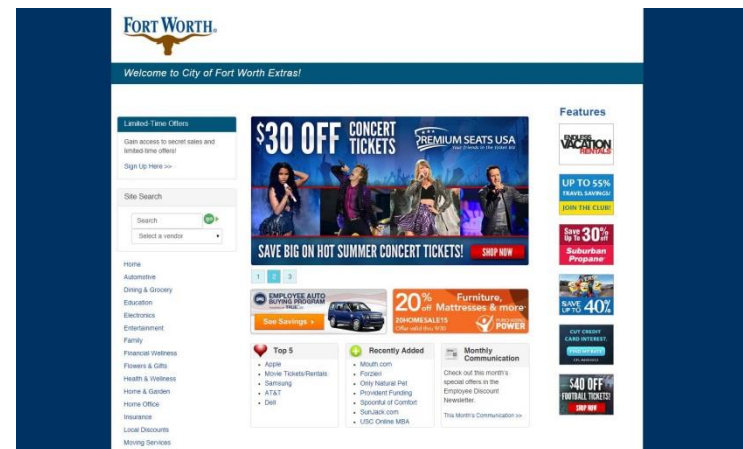
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Other Benefits

Beneplace

- Discount Site
 - Tickets
 - Big ticket items
- www.beneplace.com/cofw





USMDSM
Health System

Physician Network
SeniorCare
Hospitals
Cancer Centers
Diagnostic Services





USMDSM
Health System

Physician Network
SeniorCare
Hospitals
Cancer Centers
Diagnostic Services

Numbers to know

Need a PCP? 817.514.5277

CareToday 817.566.7466



Wellness

Healthy Challenge

- Cash Payout
 - \$150, \$200, \$250
 - Must complete MHA, Tobacco and Physical
- Point-based Program
 - 150, 200, 250 points = \$150, \$200, \$250
 - 150 points for completing MHA, Tobacco & Physical
 - Other ways to earn points at MyViverae.com
 - Videos
 - Webinars
 - Programs
 - Challenges
 - Healthy Challenge Classes & Events

More Questions?

Fort Worth Benefits Office

817-392-8644

Benefits_retirees@fortworthtexas.gov

www.fortworthtexas.gov/benefits